PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number
...
2003-ORT

OLAUSO AO EU ED DADE												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN	
TOTAL CLAIMS			1			dilli Z)]	RATE	FEE			ENTITY
FOR			NUMBER FILED		NUMBER EXTRA		1	BASIC F			RATE BASIC FEI	FEE 770.00
To	OTAL CHARGE	EABLE CLAIMS	/// п	(A) minus 20= *		*			000.0	HOH	ļ —	- 770.00
IN	DEPENDENT	CLAIMS	17	minus 3 =	*	* >		X\$ 9=		OR	X\$18=	ļ
		ENDENT CLAIM I		111103 0 =				X43=		OR	X86=	
* !	f the difference	o in column 4 is	- 1 11-	loop then pare and a #00				+145=		OR	+290=	
				less than zero, enter "0" in column 2			·	TOTAL		OR	TOTAL	770
		(Column 1)	AMENDE	MENDED - PART II (Column 2) (Column 3)				LIVWS	. ENTITY	0.0	OTHER	
		CLAIMS	1	HIGHE				SWALL	EMILLA	OR	SMALL	ENIIIY
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE	-	RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	, , , ,
AME	Independent	*	Minus			=	Ī	X43=		OR	X86=	
	FIRST PRES	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM			+145=	†		+290=	
							L			OR		
							А	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
m		CLAIMS		HIGHE			Г		ADDI-	7 6		1001
		REMAINING AFTER	· ·	PREVIOL		PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL
<u>ا</u> پ		AMENDMENT		PAID F		EXTRA			FEE		HAIL	FEE
AMENDMENT	Total	*	Minus	**		=	Γ	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	r	X43=		1 1	X86=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DE	PENDENT C	CLAIM		┢			OR	7,00=	
				·			L	+145=		OR	+290=	:
							ΑE	TOTAL DDIT. FEE		OR A	TOTAL DDIT. FEE	
-		(Column 1)		(Column		(Column 3)						ļ
د	•	CLAIMS REMAINING		HIGHES NUMBE		DDECENT			ADDI-	F		ADDI-
2		AFTER AMENDMENT		PREVIOU	SLY	PRESENT EXTRA	j	RATE	TIONAL		RATE	TIONAL
I NEW CALL	Total		Minus	PAID FC	, A		\vdash		FEE	-		FEE
	Independent		Minus	**		=	L	X\$ 9=		OR	X\$18=	
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* If the entry in column 1 is less than the intry in column 2 write *0" in column 2										OR	+290=	
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
Th	ne "Highest Num	ber Previously Paid	For" (Total or	Independent)	is the h	o, enter "3." nighest number f			ropriate box	in colur	nn 1.	